

08/22/00
JG885 U.S. PTO

08-23-00 A

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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JC821 U.S. PTO
09/643376
09/22/00

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 00-0405-US

First Inventor or Application Identifier Troy D. Olson

Title Apparatus and Method for Supporting a Dial Test Indicator

Express Mail Label No. EJ872104333US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Specification [Total Pages 21]
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. Drawing(s) (35 U.S.C. 113) [Total Sheets 10]
4. Oath or Declaration [Total Pages 2]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

5. Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Paper Copy (identical to computer copy)
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. 37 C.F.R. §3.73(b) Statement Power of (when there is an assignee) Attorney
9. English Translation Document (if applicable)
10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
11. Preliminary Amendment
12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. * Small Entity Statement(s) Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired
14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No. /

Prior application information: Examiner Group / Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			or <input checked="" type="checkbox"/> Correspondence address below	
Name	Michael A. Mochinski, Attorney at Law				
Address	3300 Bass Lake Road, Suite 514				
City	Brooklyn Center	State	MN	Zip Code	55429
Country	United States	Telephone	(612) 585-0283		Fax (612) 585-0284

Name (Print/Type)	Michael A. Mochinski	Registration No. (Attorney/Agent)	42900
Signature	<i>Michael A. Mochinski</i>	Date	08/21/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments **must** be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 345.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Troy D. Olson
Examiner Name	
Group / Art Unit	
Attorney Docket No.	00-0405-US

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number Deposit Account Name Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.172. Payment Enclosed: Check Money Order Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 690	201 345	Utility filing fee	<input type="text" value="345.00"/>
106 310	206 155	Design filing fee	<input type="text"/>
107 480	207 240	Plant filing fee	<input type="text"/>
108 690	208 345	Reissue filing fee	<input type="text"/>
114 150	214 75	Provisional filing fee	<input type="text"/>
SUBTOTAL (1) (\$ 345.00)			

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20**	= 0	<input type="text" value="0.00"/>
Independent Claims 3	- 3**	= 0	<input type="text" value="0.00"/>
Multiple Dependent		<input type="text" value="130.00"/>	<input type="text" value="0.00"/>

**or number previously paid, if greater; For Reissues, see below

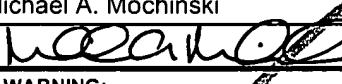
Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 78	202 39	Independent claims in excess of 3
104 260	204 130	Multiple dependent claim, if not paid
109 78	209 39	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0.00)		

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	<input type="text"/>
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139 130	139 130	Non-English specification	<input type="text"/>
147 2,520	147 2,520	For filing a request for reexamination	<input type="text"/>
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115 110	215 55	Extension for reply within first month	<input type="text"/>
116 380	216 190	Extension for reply within second month	<input type="text"/>
117 870	217 435	Extension for reply within third month	<input type="text"/>
118 1,360	218 680	Extension for reply within fourth month	<input type="text"/>
128 1,850	228 925	Extension for reply within fifth month	<input type="text"/>
119 300	219 150	Notice of Appeal	<input type="text"/>
120 300	220 150	Filing a brief in support of an appeal	<input type="text"/>
121 260	221 130	Request for oral hearing	<input type="text"/>
138 1,510	138 1,510	Petition to institute a public use proceeding	<input type="text"/>
140 110	240 55	Petition to revive - unavoidable	<input type="text"/>
141 1,210	241 605	Petition to revive - unintentional	<input type="text"/>
142 1,210	242 605	Utility issue fee (or reissue)	<input type="text"/>
143 430	243 215	Design issue fee	<input type="text"/>
144 580	244 290	Plant issue fee	<input type="text"/>
122 130	122 130	Petitions to the Commissioner	<input type="text"/>
123 50	123 50	Petitions related to provisional applications	<input type="text"/>
126 240	126 240	Submission of Information Disclosure Stmt	<input type="text"/>
581 40	581 40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146 690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149 690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
Other fee (specify) _____			<input type="text"/>
Other fee (specify) _____			<input type="text"/>
Reduced by Basic Filing Fee Paid			<input type="text"/>
SUBTOTAL (3) (\$)			

Complete if applicable

Name (Print/Type)	Michael A. Mochinski	Registration No. (Attorney/Agent)	42900	Telephone	(612)585-0283
Signature		Date	08/21/2000		

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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